

Introduced by Senator Liu
(Principal coauthor: Assembly Member Brown)

February 26, 2015

An act to add Section 14132.279 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

SB 492, as introduced, Liu. Coordinated Care Initiative: Consumer Bill of Rights.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. One of the methods by which these services are provided is pursuant to contracts with various types of managed care health plans. Existing federal law provides for the federal Medicare Program, which is a public health insurance program for persons 65 years of age and older and specified persons with disabilities who are under 65 years of age.

Existing law, the Coordinated Care Initiative (CCI), requires the department to seek federal approval pursuant to a Medicare or a Medicaid demonstration project or waiver, or a combination thereof, to establish a demonstration project that enables beneficiaries dually eligible for the Medi-Cal program and the Medicare Program to receive a continuum of services that maximizes access to, and coordination of, benefits between the programs.

This bill would establish the Coordinated Care Initiative Consumer Bill of Rights, which would set forth rights to which an individual receiving care under the CCI would be entitled, including, but not

limited to, rights to self-direction and choice, quality, flexibility, and accessibility of service, cultural competence, and an appropriate grievance and appeal process, as specified. The bill would require the department to make the information available to the public, as specified.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14132.279 is added to the Welfare and
2 Institutions Code, to read:

3 14132.279. (a) This section shall be known, and may be cited,
4 as the Coordinated Care Initiative Consumer Bill of Rights.

5 (b) A consumer under the Coordinated Care Initiative shall have
6 all of the following rights:

7 (1) The right to self-direction. The individual shall have the
8 option to coordinate his or her care and services. If due to cognitive
9 impairment the individual is unable to do so, a statutory option
10 should be made available to allow for a surrogate or informal
11 caregiver chosen by the individual to coordinate care.

12 (2) The right to choice. Plan networks should ensure that
13 individuals have access to, and choice of, a range of providers and
14 settings across the continuum of care, including health care
15 services, behavioral health services, and long-term services and
16 supports.

17 (3) The right to coordination. An individual shall have access
18 to care coordination, in accordance with his or her needs and
19 preferences.

20 (4) The right to integration of services. Services shall be
21 delivered to the individual in an integrated manner, regardless of
22 the source of payment.

23 (5) The right to flexibility. Services within a plan's contracted
24 services shall meet the individual's changing needs and incorporate
25 new modes of service and supports.

26 (6) The right to quality. All services and supports shall be of
27 high quality and shall be personcentered. Statutory standards be
28 established should to provide a mechanism for enforcement.

29 (7) The right to cultural competence. Individuals shall have
30 access to threshold language services. Services should be
31 appropriate and responsive to the needs of all populations.

1 (8) The right to accessibility. Services and information shall be
2 easy to access. In accordance with the federal Americans with
3 Disabilities Act, services shall be delivered in a manner that is
4 physically, cognitively, and programmatically accessible.

5 (9) The right to personal assistants and caregivers. The system
6 of care shall support the role of quality paid and unpaid caregivers,
7 including family caregivers, and shall recognize the importance
8 of workforce development, caregiver needs assessment, and the
9 availability of training.

10 (10) The right to independence. Services across the continuum
11 shall support maximum independence, full social integration, and
12 quality of life.

13 (11) The right to grievances and appeals. Participants shall have
14 access to an independent grievance and appeals process. Access
15 and resolution shall be prompt, without disruption in service
16 delivery.

17 (12) The right to timeliness. All services and supports shall be
18 delivered in a timely manner, in order to ensure the individual's
19 optimal health and functioning.

20 (c) The department shall post the Coordinated Care Initiative
21 Consumer Bill of Rights on its Internet Website, and shall also
22 provide copies to members or the public upon request. The
23 department shall make the bill of rights available to the public in
24 prevalent languages.